

**Projects for Assistance in Transition
From Homelessness (PATH)
Formula Grant Program
Application Summary**

FFY 06 – SFY 07

May 31, 2006

**Kentucky Department for Mental Health
And Mental Retardation Services**



PATH APPLICATION SUMMARY

Table of Contents

FACE PAGE:	1
TABLE OF CONTENTS:	2
PROJECT NARRATIVE:	3
A. EXECUTIVE SUMMARY	3
B. STATE LEVEL INFORMATION	4
1. Definitions	4
2. Needs Assessment.....	5
3. PATH Site Selection Process.....	8
4. Coordination with State Plan	10
5. Mental Health Block Grant.....	11
6. Programmatic and Financial Oversight	12
7. Staff Training	13
8. Matching Funds	14
9. Opportunity for Public Comment	14
C. LOCAL PROVIDER INTENDED USE PLANS	16
1. Bluegrass Regional MHMR Board.....	16
2. NorthKey Community Care.....	19
3. Seven Counties Services	24
4. Lake Cumberland Regional MHMR Board.....	27
5. Kentucky River Community Care	30

A. EXECUTIVE SUMMARY

The Kentucky Department for Mental Health and Mental Retardation Services (KDMHMRS) has designated persons experiencing severe, disabling mental illness as a priority group for funding and programming. Within this population, persons who are also homeless have been identified as an underserved subgroup receiving special focus in state planning efforts. Pursuant to an invitation from the Substance Abuse and Mental Health Services Administration, the Department is applying for \$388,000 under the Projects for Assistance in Transition from Homelessness (PATH) Formula Grant Program to augment its present initiatives on behalf of this population.

The KDMHMRS will award the PATH Formula Grant to continue projects in the five regions funded in SFY 2006. All PATH Formula Grant funds will be subcontracted to the selected Regional MH/MR Boards for project implementation and each Regional Board will provide a \$1 non-federal match for every \$3 in PATH funds. KDMHMRS does not request administrative expenses. A brief overview follows:

Region	Service Area	Services Funded by PATH	Number Served
Bluegrass CMHC \$109,000	Fayette County	Subcontract to Hope Center to provide case management, staff training, outreach, mental health treatment, screening and diagnostic services, and rehabilitation	125
NorthKey CMHC \$99,000	Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen and Pendleton Counties	Multidisciplinary outreach team employed by the CMHC to provide screening, treatment, and case management. Subcontract with Welcome House to provide case management and payeeship services.	200
SCS CMHC \$75,000	Louisville Metropolitan Area	Subcontract to Volunteers of America to provide residential support for an eight bed transitional facility for homeless males.	40
Adanta CMHC \$56,000	Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor and Wayne Counties	Outreach, screening and diagnostic services, case management and housing support services.	120
KY River CMHC \$49,000	Breathitt, Knott, Lee, Leslie, Letcher, Owsley, Perry and Wolfe Counties	Outreach, case management, housing support services, and support for six emergency apartments for homeless persons with a mental illness.	48

Funding will be used to increase, augment, and improve the delivery of specialized/supportive mental health services to persons who are homeless and mentally ill, to promote the involvement of community mental health centers in the development of a coordinated service delivery system, and to provide local trainings to increase the skill of staff providing services to homeless persons in assessing mental health problems and making appropriate referrals to community agencies.

B. STATE LEVEL INFORMATION

1. Definitions

For the purposes of the PATH Formula Grant Program, the KDMHMRS has adopted the following definitions for homelessness, imminent risk of becoming homeless, serious mental illness, and dual diagnosis:

a. Homeless Individual

A "homeless individual" means an individual who lacks housing (without regard to whether the individual is a member of a family), including an individual whose primary residence during the night is a supervised public or private facility that provides temporary living accommodations and an individual who is a resident in transitional housing.

b. Imminent Risk of Becoming Homeless

"At risk" is operationally defined as a person who meets the definition of serious mental illness and who:

- has a history of unstable or inadequate housing arrangements;*
- resides in transitional or temporary housing;*
- has a basic unmet need for such things as adequate income, stable housing, and employment;*
- is presently in a psychiatric hospital with discharge pending and a history of not engaging in the mental health system; or*
- has a substance abuse problem.*

c. Serious Mental Illness

Kentucky law (KRS 210.005) defines serious (a.k.a. chronic) mental illness as follows:

Mental illness is a diagnostic term that covers many clinical categories, typically including behavioral or psychological symptoms, or both, along with impairment of personal and social function. It is specifically defined and clinically interpreted through reference to criteria contained in the Diagnostic and Statistical Manual of Mental Disorders (Fourth Edition) and any subsequent revision thereto, of the American Psychiatric Association. Chronic means that clinically significant symptoms of a mental illness have persisted in the individual for a continuous period of at least two years, or that the individual has been hospitalized for mental illness more than once in the last two years, and that the individual is presently significantly impaired in ability to function socially or occupationally, or both.

The operational definitions used in Kentucky that describe diagnosis, duration, and disability are listed below:

- (1) Diagnosis (major mental disorders): Schizophrenia; major affective disorders; certain personality disorders; and other disorders where duration or disability criteria are met.*
- (2) Duration: More than one psychiatric hospital admission in the past year; one hospitalization in the past year whose duration extended beyond thirteen (13) days; or three or more psychotic episodes within a year causing the person's community tenure to be seriously threatened; or the illness is expected to continue for two years.*
- (3) Disability: Dysfunctional in at least two of the following areas: vocational; social relations; independent living; self-care; and use of community resources.*

d. Co-occurring serious mental illness & substance use disorders

A person is considered dually diagnosed with serious mental illness and substance abuse if the person meets the definition of serious mental illness as defined by Kentucky statute and has substance abuse related problems which exacerbate the person's psychiatric symptomatology or seriously impair the person's ability to function in two of the following areas: vocational, residential, or activities of daily living.

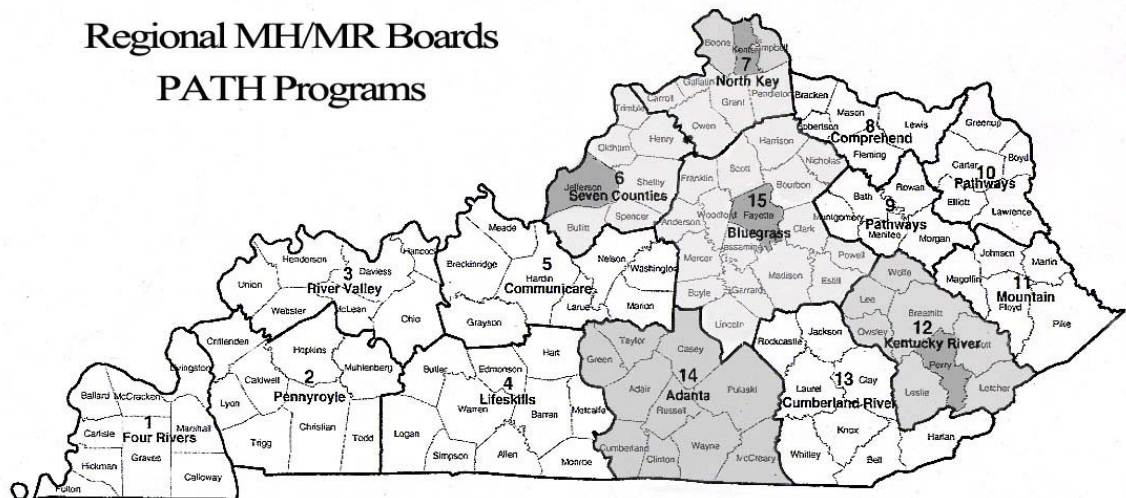
No person may be excluded from the PATH Formula Grant program because they have a diagnosis of substance abuse, if there is a concomitant mental illness diagnosis.

2. Needs Assessment

The Kentucky Housing Corporation's (KHC) Draft 2006 Action Plan reports that, in January 2005, the state's six Continuum of Care planning regions conducted point-in-time counts to identify the number homeless individuals in their region. The count revealed that approximately 19,141 persons experience homelessness each year in Kentucky. Of these, nearly one third are unsheltered, and 2,470 are chronically homeless. KHC's Housing Needs Assessment 2004 estimates the total homeless population to be approximately 1% of the total population, and KHC's Homeless Survey 2001 reported approximately 17% of homeless respondents identified a serious mental illness. With population figures from the 2000 Census, there are an estimated 30,471 homeless adults in Kentucky, and **5,180 homeless adults with a serious mental illness** (at some point in time during a 12 month period). The following table shows this information broken down by region.

Regional MH/MR Boards*	Adult Census 2000	Homeless Estimation	Homeless SMI Estimation
1. Four Rivers	157,510	1,575	268
2. Pennyroyal	154,361	1,544	262
3. River Valley	155,001	1,550	264
4. Lifeskills	193,083	1,931	328
5. Communicare	177,804	1,778	302
6. Seven Counties	654,224	6,542	1,112
7. Northkey	286,137	2,861	486
8. Comprehend	41,452	415	71
9/10. Pathways	162,796	1,628	277
11. Mountain	121,476	1,215	207
12. Kentucky River	91,201	912	155
13. Cumberland River	177,872	1,779	302
14. Adanta	147,152	1,472	250
15. Bluegrass	526,882	5,269	896
Total	3,046,951	30,471	5,180

* Regions with PATH Programs are shaded in grey. Dark grey indicates a county specific program; medium grey indicates a region-wide or extended service area.



In the Bluegrass region, the most recent homeless count in the county (January 24, 2005) indicated there were 1,210 homeless persons; this was an almost 60% increase over the 692 counted in FY03, showing an increasing problem with homelessness in this area. Of the 1,210 counted, 161 were severely mentally ill. Further, Bluegrass's consumer survey indicated that approximately 10% of persons with severe mental illness become homeless in a given year. If 3% of the population of Fayette County has a severe mental illness (NIMH estimate) and 10% of them become homeless, that would project to be 325 persons who would meet PATH eligibility criteria.

A Northern Kentucky Point-in-Time Homeless Survey was recently conducted on January 27, 2005 from 4:00-7:00 p.m. and reports counted 305 sheltered and unsheltered homeless individuals in the Northern Kentucky counties of Boone, Kenton, and Campbell. Based on figures from the Kentucky Housing and Homeless Coalition, 18.4% of the population of Covington and 22.3% of the population of Newport were below the poverty level, and 6.3% of those persons were likely to experience homelessness. Based on the Covington and Newport census in 2000, a very conservative figure of homeless individuals for those cities alone would be 741 individuals. With a prevalence rate of 17% of homeless persons also having a mental illness, this would mean 126 persons in Covington and Newport alone. Since this program covers the entire Northern Kentucky region, the number of homeless persons with a mental illness would be much higher. Due also to the proximity to Cincinnati, it is likely that the homeless population is increased from there as well.

In the Seven Counties region, the Coalition for the Homeless reports that 11,006 persons used homeless services in 2004. Of these, 6,327 were unattached males, 1,989 unattached females, and 551 families. 30% reported a mental illness and 25% a substance abuse problem. Of unattached adults, this would suggest that 2,495 persons were homeless and had a mental illness. In a Point-in-Time survey conducted on January 24th, 2005, there were 744 homeless persons surveyed within the shelter system. Of these, 13.8% reported a mental disability, 31.4% report having been hospitalized, 36.3% admitted to suicidal ideation, and 26.5% are currently on medication. There were also 63 persons surveyed who were living on the street. Of these, 29% reported a mental disability.

The Adanta/Lake Cumberland area is typical of rural Kentucky in that it has few centers of commerce and industry, and its population's median income is among the lowest in the state. For those with income from disability or minimum-wage employment, it is unlikely that appropriate housing can be found. Data from the Lake Cumberland Area Development District shows at least twice as much demand for affordable rental housing as is available. The homeless population, however, tends to be less visible, being more likely to live in a car or camper or with relatives in overcrowded or substandard housing. Consequently, there are no homeless shelters in the ten-county area. The Adanta PATH Program estimates that over 120 persons will be served this year.

The Kentucky River region, as in the Adanta region, is among the lowest in median income for the state, and the few options for jobs pay minimum wages and offer no benefits. Unemployment rates are 1.5 to 3 times the national level, which doesn't take into account the number of structurally unemployed – those who have lost hope and stopped looking for work and are not receiving unemployment payments. Data from the Annie E. Casey Foundation reports over 50% of the adult population of Perry County is not in the labor force. Much of public housing is dilapidated and inaccessible. In some instances, the homeless are living in habitation deemed unfit, lacking in plumbing, electricity, or flooring. A Kentucky Housing Corporation study identified Perry County as having one of the highest rates of homelessness in rural Kentucky. The Community Mental Health Center estimates the true homeless population to be as high as 5,000

persons in the eight county area. Local shelter data indicates that 40% also have mental illness and/or a substance abuse problem.

3. PATH Site Selection Process

Kentucky is divided into fourteen geographic regions for the purposes of planning and providing publicly funded community mental health services. For each region, a Regional Board has been established as the planning authority and service provider. The Regional Boards are independent, non-profit organizations, overseen by a volunteer board of directors that broadly represents stakeholders, and are licensed by the Cabinet for Health and Family Services as a “community mental health center.” Regional Boards have collaborated with KDMHMRS to expand the array of community mental health services to include community support services, such as targeted services to homeless and rural populations.

a) Need for Services

Kentucky has traditionally allocated funds to the regions with the greatest number of persons who were homeless and mentally ill and that targeted the services to persons who were mentally ill and actually homeless. Funding has, therefore, been directed toward the urban areas of the state. However, in SFY 04, KDMHMRS elected to develop a competitive bid process to provide funding opportunities to the rural as well as urban areas of the state. Proposals were received from eight regions, with five meeting review criteria (the three urban regions, as well as two rural regions).

For SFY 05 and 06, KDMHMRS received an increase in PATH funding and elected to continue funding these five regions and to award the increase based on a review of the each regions’ past performance and current proposals, how well they met PATH Program goals and requirements, cost effectiveness, and targeting of services to the greatest number of persons who are homeless and mentally ill.

For SFY 07, PATH funding for Kentucky was decreased and KDMHMRS allotted the reduced funding based on the above criteria, with the poorest performing program receiving the largest reduction in funding, and the program which most meets PATH Program goals receiving a slight increase.

It should be noted that KDMHMRS is working with Seven Counties Services, the poorest performing program, in transitioning PATH funding into a more appropriate street outreach and case management service. Seven Counties Services currently operates a Homeless Outreach Team funded through the Continuum of Care. However, since this is a service only project, they will be losing funding through the CoC, which is moving toward a focus on provision of housing. The SCS/Shelby Men’s Center, which is a transitional housing program, would be more appropriate for CoC funding. KDMHMRS, Seven Counties Services, and Volunteers of America are working toward transitioning funding for this program over to the Continuum of

Care. PATH funding will then be transitioned into Seven Counties Services' Homeless Outreach Team. Both of these programs provide much needed assistance for homeless persons and need to be continued. KDMHMRS will work on providing them the proper funding source.

b) Special Consideration Regarding Veterans

Eight percent of the persons served in Kentucky PATH programs are veterans, almost all of these in the urban regions. The Census 2000 shows that there are generally fewer veterans among the rural Eastern Kentucky adult population than in other areas. Overall, 12.6 percent of the Kentucky adult population are veterans. Consideration for demonstrated effectiveness and agency wide initiatives in serving veterans are included in the review of PATH applications submitted by the Regional MHMR Boards. All regions give a priority for services to homeless veterans.

In the Bluegrass region, the HOPE Center in Lexington continues to sponsor a Veterans Peer Support Group that meets bi-monthly to discuss veterans' needs and is attended by representatives from the Veterans Administration (VA). Special attention is paid to assisting veterans with accessing VA benefits, and accessing services specific to them, such as medical care and housing. Additionally, if a veteran prefers mental health treatment through the VA, PATH staff assist them in accessing this.

NorthKey's Housing Developer has maintained an active collaboration with the VA regarding the needs of the individuals they are serving, and three NorthKey psychiatrists also work for the VA and can assist in facilitating a smooth transition into this system. Due to the proximity to the Cincinnati Area, Northern Kentucky veterans are served by the VA in Cincinnati.

The Seven Counties Services/Volunteers of America program has a strong collaborative relationship with the Kentucky Department of Veterans Affairs, as well as the Veterans Administration and currently operates a 40 bed Treatment / Transitional Program for homeless Veterans in Fayette County KY. The Shelby Men's Center works to identify veterans who are eligible for benefits and engages them with a benefits representative. If a veteran is in need of additional services they are referred to the Fayette County program for in-house services up to two years with step down services.

The Adanta/Lake Cumberland PATH Program has assisted four identified homeless veterans in obtaining safe, decent and affordable housing. During the assessment to determine eligibility to the program, military experience is identified. The Housing Support Specialist works with the local Veterans Administration to bring awareness to this program.

Although there are fewer veterans in the rural regions, Kentucky River Community Care does give a priority to veterans for all services supported by the PATH grant,

including case management and the emergency apartments it operates for the homeless.

4. Coordination with State Plan

In the development of the original State Plan for Comprehensive Community Mental Health Services, under Public Law 102.321, KDMHMRS integrated several federal, state, and private funding sources to support the comprehensive plan. The use of PATH Formula Grant funds has served an integral role in the development of specialized services to persons with a serious mental illness who are homeless. By combining PATH and other McKinney funds with state and federal funds, KDMHMRS and the Regional MH/MR Boards attempt to provide a statewide system of outreach, community support, and mental health services.

Most Regional MH/MR Boards offer individualized services designed to alleviate homelessness as well as to provide “mainstream” mental health treatment to persons who are homeless and mentally ill. Of the fourteen Regional MH/MR Boards in Kentucky:

- All Regions give a service priority to homeless individuals;
- Thirteen Regions participate in regional Continuum of Care routine meetings;
- Eleven Regions have a walk-in clinic;
- Ten Regions do consultation with local shelters;
- Eight Regions regularly visit local homeless shelters;
- Six Regions have staff dedicated to homeless individuals; and
- Three Regions do street outreach.

KDMHMRS recognizes the importance of system coordination among the numerous agencies and programs involved with services to this population. At the state level, KDMHMRS participates in the Kentucky Interagency Council on Homelessness (KICH), a group of state and local providers, consumers and government officials, established as a result of Kentucky’s participation in a Homeless Policy Academy funded by the Departments of Housing and Urban Development (HUD) and Health and Human Services (HHS). The goal of this group is to develop statewide systems and policies that forge partnerships among state agencies that allow communities to achieve local solutions to homelessness, in addition to establishing targets for permanent supported housing production. The Council drafted Kentucky’s Ten-Year Plan to End Homelessness, announced by Governor Fletcher in January 2006.

In SFY 06, KDMHMRS, the Louisville Coalition for the Homeless, Families and Children First, and The Adanta Group, with collaboration from the Department of Corrections and the Department for Community Based Services, initiated a Homeless Prevention Pilot Project, which assists persons being discharged from state facilities with accessing housing and mainstream services, in an effort to limit discharges to homeless shelters. This project assists persons serving out of the prison system, persons being discharged from mental institutions, persons aging out of foster care, and is coordinated with the PATH Program where appropriate.

Also in SFY 06, KDMHMRS' PATH Administrator participated in a "Housing Workout" with the Louisville Metro government and local housing and service agencies. The purpose of this "Workout" was to find ways to reorganize and better coordinate housing and services to reduce homelessness in the city; and to address a loss of HUD Continuum of Care funding. One result of this effort was the initiation of discussions with Seven Counties Services to fund a Homeless Outreach Team through the PATH Grant. It is anticipated that funding will be transitioned over the next few years into this program and out of the Shelby Men's Center, for which more appropriate funding will be sought.

5. Mental Health Block Grant

Kentucky's Community Mental Health Services Performance Partnership Block Grant, developed pursuant to Public Law 99-660, includes a comprehensive and detailed plan to provide a system of outreach and specialized services to persons who are homeless and who have a serious mental illness and/or a substance abuse related disorder. Services provided by the PATH Formula Grant and other McKinney monies are consistent with and instrumental to the development of a comprehensive array of services for this population. KDMHMRS collaborates with the Specialized Housing Resources Department within KHC in the maintenance of local Continuum of Care Committees. Regional MH/MR Boards are encouraged to participate in this process for the benefit of individuals with severe mental illness who may be or become homeless in their regions.

KDMHMRS provides state funds to the St. Johns' Day Center in Louisville to employ an outreach worker. This staff person provides on-site assessment and links individuals with services at Seven Counties Services, the Regional MH/MR Board for Louisville. During SFY 06, CMHS Block Grant funds will continue to support a Rural Homeless Outreach program in the Mountain Regional MH/MR Board area. The goals of this program will be the identification and linkage of individuals with serious mental illness who are homeless with mainstream mental health services and the provision of consultation and training to homeless service providers. The service providers will primarily be members of the region's Continuum of Care group charged with developing regional, collaborative strategies to serve the homeless

Staff within the Division of Mental Health and Substance Abuse are playing a principal role in identifying barriers to receipt of mainstream mental health and substance abuse services by individuals who have been chronically homeless. KDMHMRS staff and Regional MH/MR Board staff use a number of strategies to insure that individuals with serious mental illnesses who are homeless are evaluated and receive necessary services. These include:

- Identifying individuals who have been homeless more accurately in the client data set;
- Providing accommodations in clinic and other program hours;
- Providing specialized training to case managers and clinicians;
- Establishing formal and informal linkages with homeless services providers; and

- Continued participation in local Continuum of Care meetings.

Specific goals for SFY 06 include collaboration with homeless service providers and other state agencies in implementing the Homeless Prevention Pilot Project, to address the problem of institutional discharge to homelessness.

6. Programmatic and Financial Oversight

The monitoring of Regional Board subcontractors and the PATH programs focuses on the measurement of fiscal and programmatic soundness, consistency with standards, effectiveness, and the impact of services on persons served. Because the PATH funds are contracted solely to the Regional Boards, which serve as the primary providers for community-based mental health services, KDMHMRS has incorporated the same strategies for administrative and program oversight for the PATH services as established for other community-based services. These are:

- Internal Program & Financial Monitoring of Regional Boards

Plans and Budgets must be developed by the Regional Boards within the guidelines provided by KDMHMRS, which reviews and approves the Plans & Budgets based on the document's consistency with Departmental priorities, service definitions, and standards.

The Regional Boards are required to submit semi-annual financial statements, and annual detailed client data reports to KDMHMRS. Reports from the billing system provide data that include number of persons served, units of service and service cost. These billings and reports are monitored for contract compliance and for progress toward meeting goals and objectives outlined in the Plan & Budget submission.

The Regional Boards are required to submit a detailed financial cost report, which would include the PATH award, to KDMHMRS within 60 days after the close of the fiscal year. The cost report is audited on-site by the Division of Audits. The Boards are also required to have a financial audit conducted by an independent firm at the close of each fiscal year. The State Auditor of Public Accounts also conducts an annual audit of the Department and the Regional Boards to assure compliance with federal block grant requirements. In addition, the Federal Office of Policy and Budget has the option to audit KDMHMRS and the Regional Boards for compliance with federal regulations.

- On-Site Program & Administrative Reviews of Regional Boards

The Department is currently developing a Monitoring and Oversight process for review of the Regional Boards which will reference contract, statute, regulation and specific grant citations, such as the PATH Grant. The standards used address services, programs and operations essential to good management; including administrative and

fiscal controls, staff training/development and safety/emergency procedures. These standards are under continual revision to reflect changing practice, new knowledge and agency and departmental experience. As this process continues to grow and develop, the standards will incorporate measurable outcomes from established performance indicators. Also, well documented methods of best practices in the area of treatment and service delivery will be incorporated into future standards.

- **Peer Review of Regional Boards**

In SFY 04, KDMHMRS initiated a Peer Review process, which is coordinated by the Kentucky Consumer Advocate Network. This review consists of consumers, family members and professional peers who interview consumers of the Regional Boards' services, family members, Regional Board staff, and staff affiliated either formally or informally with the Regional Board.

- **Other Agency Review of Regional Boards**

The fourteen (14) Regional Boards are monitored and evaluated by the Cabinet for Health and Family Services (CHFS) in a variety of ways. Within CHFS, the Department for Health Services; the Department for Medicaid Services; the Office of Inspector General; the Division of Licensing and Regulation; the Division of Audits; the Division of Special Investigations; and the Office of Administrative Services have varying roles in the monitoring and evaluation of these Boards. Many of the Regional Boards are also involved in the process of obtaining, and maintaining, JCAHO accreditation.

- **Direct Monitoring and Review of PATH Programs**

The State PATH Administrator also conducts reviews of the regional PATH programs, which include interviews with staff and regional administrators, year-end data and trend analysis, performance comparisons with PATH programmatic goals, and on-site program reviews and observations. Quarterly meetings with program staff are convened to address state and national changes, programmatic issues and training needs.

7. Staff Training

The Regional Boards provide training directly with their staff, including PATH-funded staff. These staff members, as well as other service providers to the homeless, are regularly invited to KDMHMRS' semi-annual Case Management Level I Certification training, and annually to training in mental health issues for Personal Care Home Providers, as well as conferences on supported housing and homelessness issues.

KDMHMRS has also collaborated with KHC and KICH on the SSI/SSDI Outreach, Access, and Recovery (SOAR) Technical Assistance Initiative. A PATH staff member

from the Welcome House in Northern KY was among those chosen to attend the “Train-the-Trainer” training during SFY 06, and is in the process of training other homeless service workers, including other PATH staff, in assisting eligible persons in applying for disability benefits.

8. Matching Funds

All Regional Boards are required under Kentucky statute to provide inpatient services, outpatient services, emergency services, partial hospitalization or psychosocial rehabilitation services, consultation and education services, and services to persons with mental retardation. All of these services, as appropriate, are available to persons who are homeless.

In keeping with KDMHMRS policies (based on 902 KAR 6:010), PATH Formula Grant funds are subcontracted by KDMHMRS to the Regional Boards based on their Plans & Budgets. The Regional Board’s response to the Plan & Budget process is the basis for the contractual agreement between KDMHMRS and the Regional Board to provide services consistent with departmental, state and federal priorities, service definitions and standards.

Regional Boards may also subcontract with an appropriate community organization to provide services. Such proposals must first be submitted to and reviewed by the Program Planning and Evaluation Committee of the Regional Board in accordance with the Board's established subcontracting procedures.

The Regional Boards awarded PATH funding provide matching funds through the use of existing facilities, equipment, supplies and direct and region-wide administrative support, as well as matching funds for salary, benefits and travel.

In addition to the required services identified above, KDMHMRS has funded community support services for persons with serious mental illness within each Regional Board. Although efforts to expand and improve the quality of community-based services are not specifically designed to address the homeless issue, utilization of these services by high-risk individuals may obviate such persons from becoming homeless or assist the individuals in leaving a homeless situation. These services are consistent with recommendations issued by the American Psychiatric Association's Task Force on the Homeless Mentally Ill, and include case management, supported employment, housing, and psychosocial day programming.

9. Opportunity for Public Comment

The Kentucky State Mental Health Planning Council, consisting of consumers, family members, providers, and other key stakeholders meet to review the utilization of block grant funds, to assess the implementation of the state plan and to determine funding

priorities. The award of PATH funds is included in this process. Specific goals and objectives for services to homeless persons with serious mental illness have been reviewed and revised annually by the Planning Council for inclusion in the annual CMHS Block Grant application.

Kentucky's PATH application will also be posted on the KDMHMRS web-site. Comments will be solicited and directed to the state PATH Coordinator.

C. LOCAL PROVIDER INTENDED USE PLANS

Bluegrass Regional Mental Health/Mental Retardation Board, Inc. and its subcontractor, the HOPE Center

1. *Name, type of organization, services provided and region served –*
Bluegrass Regional Mental Health-Mental Retardation Board, Inc., is a private non-profit Community Mental Health Center, which is the primary provider of mental health, mental retardation, and substance abuse services in the region.

The HOPE Center is a private non-profit shelter and homeless service provider. PATH services are provided in Fayette County, Kentucky

2. *PATH Funding* - \$109,000
3. *Services Plan –*
 - a. **Number served**
Bluegrass / HOPE Center expect to serve 125 people experiencing homelessness and severe and persistent mental illness. All persons served will be in the homeless shelter, and as such, “literally” homeless.
 - b. **Services to be Provided with PATH Funds**
 - outreach
 - community mental health services
 - staff training
 - case management
 - screening and diagnostic services
 - rehabilitation
 - supportive and supervisory services in residential settings
 - c. **Existing programs**
 - Bluegrass provides mental health services beyond PATH funded services including outpatient counseling, psychiatric services provided on-site at the HOPE Center, inpatient care for acute psychiatric illness and substance abuse disorders, a supervised apartment program, personal care home, and several rent support programs including Shelter Plus Care and Tenant-Based Rental Assistance. Bluegrass also participates in the new statewide Safe Place voucher program for persons with severe mental illness who are homeless.
 - Canaan House, Inc. provides 14 efficiency apartments
 - Bluebird House provides placements for 3 individuals in a home atmosphere
 - Veterans Administration provides mental health and medical services for veterans
 - Salvation Army provides shelter for families and children
 - St. James Place provides a 99 unit Single Room Occupancy facility
 - Lexington Fayette County Health Department provide dental and medical services
 - Chrysalis House and the HOPE Center provide substance abuse treatment for women

- Hill Rise Apartments provides 44 housing placements in an apartment setting, operated by the HOPE Center
- Samaritan Hospital provides mental health services
- Department of Vocational Rehabilitation provides vocational services such as testing, counseling, and job placement
- Area universities (University of Kentucky, University of Louisville, Morehead State University, Eastern Kentucky University) provide field placement students available to assist PATH eligible clients

Comprehensive services are provided to PATH consumers by coordination of staff from the HOPE Center and Bluegrass. This allows staff to identify client need, make referrals, and assist with linkages to services and entitlements. Case managers and nurses provided by Bluegrass participate in a weekly team meeting to facilitate collaboration. A psychiatric nurse is housed at the HOPE Center 2 days a week; a psychiatrist provides services at the site weekly. VAMC Vet Peer Support conducts bi-monthly classes at HOPE. The HOPE Center is involved in other intra-agency groups such as Lexcare, Housing Commission, and local social ministries. The Bluegrass Director of Community Support Services in Fayette County supervises the three Bluegrass staff and often attends mental health team meetings on site. Other Bluegrass staff are actively involved in collaborative inter-agency initiatives, including the local Continuum of Care effort, LEXLINC Providers' Cabinet, the Mayor's Commission on Housing and Support Services, and the Central Kentucky Housing and Homeless Initiative. These collaborative efforts keep those involved with PATH abreast of new developments and opportunities to address the needs of persons with severe mental illness who are experiencing homelessness in Fayette County and the surrounding area.

d. Gaps in services

Outreach services are provided, but have been jeopardized by local government budget cuts. HOPE has a partially PATH-funded position that serves as part of the mobile community outreach program, and sees 400 contacts per year, but only 25% are enrolled in the PATH program due to limited staffing. Transitional housing remains a challenge and major area of need. HOPE recently received funding from the Department for Housing and Urban Development (HUD) to expand its transitional housing program. Housing for individuals dually diagnosed continues to lag behind demand. Payee services remain in high demand.

Efforts continue to close the gaps. While continuing established services, HOPE has implemented an in-house program for dual diagnosis. The HOPE Recovery programs also work with those cognitively capable of participation. Case Managers utilize a payee program provided by a local church. HOPE Center still maintains its payee program on a limited basis, serving 15 persons. Bluegrass continues to develop its housing resources in Fayette County, including currently available Shelter Plus Care vouchers and Tenant-Based Rental Assistance. Bluegrass will be applying for funding in 2006 to purchase and operate a 16-bed permanent housing program for individuals with severe mental illness who are homeless. Both HOPE and Bluegrass

work collaboratively with Lexington area groups interested in housing issues, and to identify possible sources of funding to increase outreach services

e. **Special Needs of Clients with co-occurring Serious Mental Illness and Substance Use Disorders**

The HOPE Center offers dual diagnosis groups regularly and provides 12-step meetings, screenings and referrals. PATH clients also have access to Dual Diagnosis groups offered at Bluegrass' day programs, as well as individualized services offered through Bluegrass' Drug and Alcohol Program. When needed, inpatient treatment is available through Bluegrass' Schwartz Center. All Bluegrass mental health and substance abuse staff have been trained in specific dual diagnosis treatment strategies.

f. **Housing Services**

A full-time housing specialist provides intensive supports in the community, including developing relationships with landlords, and life-skills development for the participants. The HOPE Center has developed some landlords that will negotiate rent prices to accommodate lower income PATH clientele. Housing options include the Canaan House and Bluebird House. Case managers and the housing specialist actively seek to identify appropriate settings in the community. Shelter Plus Care and Section 8 vouchers are utilized fully.

4. *Coordination with Continuum of Care –*

Staff from both the HOPE Center and Bluegrass are actively involved in collaborative inter-agency initiatives and have been serving on the local Continuum of Care for many years; regularly attending committee and subcommittee meetings. They also serve on the Central Kentucky Housing and Homeless Initiative, and are involved in the LEXLINC Providers' Cabinet.

5. *Cultural Competence/Diversity-*

Staff of both the HOPE Center and Bluegrass have ongoing opportunities to attend diversity workshops through in-service, local, and state conferences. Bluegrass offers specific cultural diversity training which is mandatory for all their employees. The HOPE Center maintains a specialist in Hispanic culture. The HOPE Center and Bluegrass staff attend clinical supervision where issues of concern can be identified and addressed.

6. *Consumer and Family Participation-*

Consumers and family members are integrally involved in the overall planning processes of both the HOPE Center and Bluegrass and are also involved in on-going regional planning meetings. For example, need and direction for housing services for Bluegrass was based on a comprehensive consumer survey. Consumers/ family members of consumers serve on the Bluegrass Board. PATH program consumers continue to evaluate services through the client satisfaction surveys, and are always free and encouraged to make suggestions about possible program improvements and alternate strategies for service provision. The HOPE Center has an assistant staff position in the dual diagnosis program that is filled with a graduate of the PATH program.

**NorthKey Community Care
and its subcontractor, the Welcome House of Northern Kentucky**

1. Name, type of organization and region served –

NorthKey Community Care is a private non-profit Community Mental Health Center and is the primary provider of mental health, mental retardation, and substance abuse services in the region. NorthKey serves eight counties of the northern Kentucky area which includes Boone, Campbell, Carroll, Gallatin, Grant, Kenton, Owen and Pendleton.

The Welcome House of Northern Kentucky, Inc. is a private non-profit shelter and homeless service provider, offering case management and payee services. The program serves the northern region of Kentucky, just south of Cincinnati, Ohio. The majority of clients served in the PATH program come from Boone, Campbell, and Kenton counties which are the most urban areas.

2. Funding - \$99,000

3. Services Plan –

a. Number served

A total of 200 clients are anticipated to be enrolled, and 275 served, in the PATH program for this next fiscal year. Welcome House plans to use PATH funds to serve 25 - 30 persons with serious mental illness who are currently homeless or who have a history of cyclical homelessness. It is anticipated that 60-65% of persons served will be “literally” homeless.

b. Services to be provided with PATH Funds

NorthKey plans to provide:

- Outreach;
- Screening and diagnostic assessment;
- Habilitation and rehabilitation;
- Community mental health;
- Alcohol or drug treatment;
- Staff training;
- Case management;
- Supportive and supervisory services in residential settings;
- Referrals for primary health services, job training, and education services; and
- Housing services;

Welcome House will provide case management and payee services.

c. Existing programs

The Northern Kentucky region provides a number of services not supported by PATH funds. These include:

- St. Elizabeth and St. Luke Hospitals provide emergency room care and inpatient treatment for physical and mental health problems when needed;

- Eastern State Hospital provides longer term inpatient psychiatric treatment;
- NorthKey Community Care operates Greenup Haus, which is a supported housing program;
- A Housing Developer is on staff at NorthKey and oversees several rental subsidy programs which are specifically targeted to serve the homeless;
- Welcome House operates an emergency shelter for homeless women and children which includes case management and support program components, including employment, housing, outreach, food, and referral programs;
- Homeless Services Project is a community collaboration that provides outreach, mental health evaluation and treatment, substance abuse treatment, employment services and support, housing counseling, assistance with applications for SSI and referrals to other resources that a client might need to move from homelessness to financial self-sufficiency;
- Fairhaven Rescue Mission provides emergency shelter for homeless men for up to seven days and also some long term shelter for a very limited number of individuals. Fairhaven also has dinner for homeless men every night and offers some clothing and groceries to those in need;
- The Parish Kitchen offers a free noontime meal;
- Women's Crisis Center operates a shelter for abused women and children under a subcontract with the NorthKey;
- Pike Street Clinic (associated with HealthPoint) provides basic medical care free of charge;
- St. Vincent de Paul operates a free, stand-alone pharmacy program where free prescription drugs are available to those who meet income and expense guidelines in the 14-county Covington diocese;
- Transitions, Inc. offers chemical dependency treatment. Welcome House has a working agreement with Droegge House, a Transitions program, whereby a homeless client can be assisted with swift admission for alcohol detoxification when needed;
- Interfaith Hospitality Network of Northern Kentucky provides some emergency shelter for homeless families.
- Cold Weather Shelter at Elohim Christian Ministries offers overnight stays every night from December 1-March 31.
- Mental Health Association and Recovery Network offer educational, advocacy and peer support for consumers.
- Adult Crisis Stabilization Services through NorthKey offer 24 hr./7 days a week availability of crisis intervention services.

The current PATH outreach staff is located at the Scott Street office of NorthKey Community Care which is in Kenton County. A walk-in clinic has been offered for many years and is presently available to homeless clients three times per month on Thursday afternoons from 2:00 p.m. to 4:00 p.m. Staff from all of the above agencies are informed about the walk-in clinic and refer clients for services. The case manager and social worker visit Welcome House shelter weekly. They make efforts to communicate regularly with referral sources to help identify and engage homeless individuals with mental illness in treatment. Staff work closely with the shelters and

payee programs to provide as rapid as possible transition from homelessness to a safe living environment. Welcome House provides office space onsite for PATH staff during visits to the shelter. Outside of Kenton County, mental health services are provided to PATH-eligible clients utilizing non-PATH resources through the offices of the Community Mental Health Center (CMHC), located throughout the region. Inpatient care is provided by the local hospitals when needed and the patient can be transferred by the local hospitals to the regional state hospital if longer term care is needed. The CMHC's housing resources are available to PATH clients. NorthKey's Housing Developer is located in the same facility as the PATH program and works closely with PATH staff to assist with housing needs. In addition, NorthKey PATH staff utilize vocational services such as NorthKey's Employment Rehabilitation Program and Kentucky Department of Vocational Rehabilitation; services for substance abuse such as Alcoholics Anonymous, Transitions, Inc., and NorthKey's substance abuse programs; local hospitals, private physicians and dentists, courts, the probation departments and the Northern Kentucky Legal Aid Society. Welcome House staff are also very actively involved with the clients they serve and try to work with the clients to stabilize their mental and physical health status, to find housing and to access any public assistance for which they are eligible. Welcome House staff visit Transitions to provide case planning and housing counseling when a homeless client is involved in one of their treatment programs. Welcome House and NorthKey staff meet together every two months to review particular programmatic concerns or to review specific cases (with respect to confidentiality requirements). The internet based computer system called "Service Point" is used by NorthKey, Welcome House, and other local agencies to better coordinate service delivery to homeless clients.

d. Gaps in services

- Lack of emergency shelter for men with mental illness;
- Continuum of housing options: group homes, low-income, subsidized housing, and transitional housing;
- Lack of housing options especially for individuals who are sexual offenders or who have a history of certain felony offenses;
- Shortage of mental health care (both public and private) in the community, especially psychiatrists and other prescribers;
- Lack of evening and weekend social activities;
- Need for more dual diagnosis services (alcohol/drug and mental illness); and
- Lack of hot weather shelter;

NorthKey's Housing Developer is on the Board of the Northern Kentucky Housing and Homeless Coalition, maintains a high level of involvement and advocates for increases in available low income housing. NorthKey continues to look for ways to maximize the use of psychiatrists' and other prescribers' time, and currently prioritizes crisis clients for quick access to a prescriber through the Crisis Stabilization program if the wait for a psychiatric appointment is too long. The Payee Peer Support Program at Welcome House addresses the needs of clients for greater educational, emotional, social and spiritual support. The two current support groups hopefully will develop greater leadership and independence among clients so that improved quality of life

and less dependence on agencies with limited resources is achieved. NorthKey has a Housing Stability Specialist position to provide in-home support services or other types of outreach and support to help facilitate community tenure and independence. The PATH case manager and social worker are currently on the Advisory Board for the Cold Shelter and hopefully can help advocate for the consideration of shelter during hot weather as well.

e. **Special Needs of Clients with co-occurring Serious Mental Illness and Substance Use Disorders**

PATH staff regularly refer individuals with substance abuse disorders to groups that serve the chemically dependent such as Alcoholics Anonymous and Narcotics Anonymous. The detoxification and residential treatment facilities operated by Transitions, Inc. a NorthKey subcontractor, are available to PATH clients with serious mental illness and substance abuse disorders. The Family Alcohol and Drug Treatment Program of NorthKey, housed in the same building as the PATH program, provides substance abuse treatment services for the chemically dependent and their families. NorthKey's Residential program, Greenup Haus, is geared to meet the needs of this population. Supportive housing services through NorthKey's housing program help to assure community tenure and help recognize when a consumer may be exhibiting signs of a relapse. The therapeutic rehabilitation and consumer social recreation programs also provide a safe, drug-free environment where time is structured in a positive, healthy manner. Welcome House staff work closely with every client and see most at least once a week. Staff help clients with co-occurring disorders get to AA meetings and psychiatric appointments as well as provide needed support. The program provides payeeship and financial case management, which means that clients do not become homeless as a result of their income being spent to support the addiction.

f. **Housing Services**

The Housing Department of NorthKey coordinates three rental subsidy programs (both transitional and permanent assistance). With two of the three programs, homelessness is a prerequisite for receiving a subsidy. A fourth program is being provided in cooperation with Kentucky Housing Corporation and is specifically targeted for individuals with severe mental illness who are homeless. Rental assistance is provided for eligible applicants with ongoing supports made available to help achieve the highest level of self-sufficiency possible. The Housing Department works very closely with the PATH staff to assure access to this housing as well as other program linkages.

4. *Coordination with Continuum of Care –*

The Regional Housing Developer (as a NorthKey representative) has been an active participant in both the local and regional Continuum of Care program since they have existed as part of the HUD planning and funding process. NorthKey is a member and staff actively participate in the Northern Kentucky Housing and Homeless Coalition (with the Housing Developer serving in various officer positions and as a Board member

for many years). NorthKey was actively involved in the gathering of information for the recent point-in-time homeless count as required for the HUD CoC process.

5. *Cultural Competence/Diversity-*

NorthKey's intake paperwork, including the client's confidentiality rights under HIPAA, has been translated into Spanish, and a PATH team member is fluent in Spanish and Portuguese. NorthKey will also pay for an interpreter if a client requires one. We utilize the interpreter services available through International Family Resource Center which offers interpretation in more than 90 languages. NorthKey has recently hired a training officer who organized an agency wide cultural diversity training in December. Welcome House policies assure that staff are sensitive to age, gender, and racial/ethnic issues and differences, and trainings are provided regularly on pertinent topics.

6. *Consumer and Family Participation –*

Planning: As routine part of the initial assessment process, family issues are reviewed and the consumer is specifically asked about his or her interest and desire for family involvement in the treatment process. NorthKey has a Consumer Advisory Group which is convened bimonthly to offer input and suggestions, and which reports directly to the Board of Directors. This group primarily includes NorthKey consumers but is open to input from other consumers in the community.

Implementation: The consumer and the clinician formulate the individual's treatment plan together, and changes are made only after discussion between the consumer and the therapist. Consumers (and family members, if appropriate) are advised of their rights and responsibilities at the time of the first visit, and of the agency's grievance process. These are also posted in the waiting room.

Evaluation: Consumer satisfaction is surveyed every three months, and consumers have an opportunity at this time to express opinions or request to consult with a member of the management. Consumer input forms are available at all times in the office for consumers to express satisfaction or complaints. PATH staff will make clients aware of such forms. Welcome House has formed an advisory group comprised of clients who receive payee services. These clients meet every other week and provide input on needed educational and social opportunities. Many clients have no family involved in their lives, but when family members are available, payee staff encourages their involvement and input as long as the client is receptive and there is no breach of confidentiality.

**Seven Counties Services, Inc.
and its subcontractor Volunteers of America of Kentucky, Inc/Shelby Men's Center**

1. Name, type of organization and region served –

Seven Counties Services, Inc. is a private non-profit Community Mental Health Center and is the primary provider of mental health, mental retardation, and substance abuse services in the region.

Volunteers of America of Kentucky, Inc. / Shelby Men's Center is a non-profit agency providing treatment for severe mental illness and chemical dependency. The program is located in Jefferson County, Kentucky

2. Funding - \$75,000

3. Services Plan –

a. Number served

40 homeless men with severe mental illness will be served. All are in the shelter and considered “literally” homeless.

b. Services to be provided with PATH Funds

- Treatment for severe mental illness and chemical dependency;
- Staff training;
- Supportive and supervisory services in residential settings;
- Life skills and referrals for primary health services;
- Job training; and
- Vocational/educational and housing services.

c. Existing programs

The coordination of services with non-PATH agencies is a community based mutually responsive process. Consumers at the Shelby Men's Center receive case management services through Seven Counties Services, Inc. These case managers assist the clients in accessing appropriate medical, community, social and vocational services, including any entitlements for which the individual is eligible. Referrals are also received and made to other community agencies such as Central State Hospital, local and state correctional facilities, University of Louisville Hospital, Phoenix Health Center, Seven Counties Services, Inc., and any other local agency that provides human service supports. Referrals are also made to community based service providers such as Vocational Rehabilitation, AA/NA and other self-help support groups, public health centers and the local Department for Human Services.

d. Gaps in services

More advocacy for homeless men diagnosed with SPMI and Co-existing chemical dependency would be beneficial. Many men in our program are fathers, and are disconnected from children and family members. Volunteers of America is evaluating the potential for more community collaboration and attainment of resources for life

skills training, and adding a therapeutic component to teach parenting classes for fathers, as well as group therapy to facilitate more paternal involvement within displaced family units within our community. Other gaps in services include more follow-up after discharge, legal assistance, and smoother transitioning in-and-out of services at Volunteers of America / Shelby Men's Center. Our new staff are assessing needs, evaluating services, and implementing changes in services as needs and resources are identified.

e. **Special Needs of Clients with co-occurring Serious Mental Illness and Substance Use Disorders**

The VOA program is a structured transitional treatment program based on a phase system. All consumers attend therapy sessions, life skills groups, and 12 step groups as outlined in their individual treatment plans; and begin an immediate relationship with a mainstream mental health worker at SCS who begins a process of assisting the consumer to outline his housing preferences and begins the process of identifying community housing options.

At the same time within the VOA program a full-time therapist is conducting group and individual counseling sessions with the consumer. These sessions have several purposes: 1) to assist the consumer in identifying and providing structured ways to deal with the issues that are currently interfering with his good mental, emotional and spiritual functioning, 2) to begin identifying means to build a solid community support network, and 3) to begin planning and to identify skills and resources that will be needed for the consumer to transition from his current group living arrangements in the program to permanent housing.

Concurrently a Certified Alcohol and Drug Counselor will develop a treatment plan for those residents that have chemical dependency issues reported on the Axis 1 of their referral form. This will include individual and group counseling, Recovery Dynamics, and AA/NA.

f. **Housing Services**

The Shelby Men's Center offers transitional living facilities with semi-private sleeping rooms as a base for the clients as they develop the independent living skills necessary for self-sufficiency. Housing resource development, an integral aspect of the client's individual plan is offered through the case management services that are provided. Suitable housing arrangements have been made in the past with Woodgreen Apartments (a VOA program), Wellspring (a non-profit owner and developer of permanent housing opportunities for persons with severe mental illness), New Directions Housing Corporation (a local developer of low-income housing), Shelter + Care rental certificates from Louisville Metro, and referrals to Louisville Metro housing authority.

4. *Coordination with Continuum of Care –*

The Shelby Men's Center coordinates with the local Coalition for the Homeless and is an active participant in the Continuum of Care meetings of the Coalition. In addition, VOA participates in needs assessments and planning activities sponsored by the Coalition. This information is used by agency representatives participating in the gaps analysis process

through the Continuum of Care Planning group. The agency also participates in the Kentucky Interagency Council on Homelessness.

5. *Cultural Competence/Diversity -*

The demographic information for last year was 49% African American Males, 50% Caucasian Males, and 1% Hispanic Males. The mean age was 37. All staff are required to attend cultural diversity training when hired as a staff member of Volunteers of America of KY, Inc. Clinical staff must meet the licensing / Certification requirements in this area to maintain his / her license to practice. Ongoing training is provided through the Volunteers of America of KY, Inc. Training Institute. Staff are required to develop individual development plans in addition to their annual performance appraisals. Staff participate in weekly group supervision for ongoing training in which Cultural Diversity is a part of this venue.

6. *Consumer and Family Participation –*

Currently consumers do not participate on official boards or committees. Consumers do have access and input into programming and services through individual contact with the Director, Point-In-Time Surveys, Client Program Evaluation Surveys, and aftercare. Consumers also have advocacy through their referring agency, and case managers.

**Lake Cumberland Regional Mental Health/Mental Retardation Board, Inc.
d/b/a The Adanta Group**

1. Name, type of organization and region served –

Lake Cumberland MH/MR Board, Inc., d/b/a The Adanta Group is a private non-profit Community Mental Health Center and provider of mental health, mental retardation, and substance abuse services, serving Adair, Casey, Clinton, Cumberland, Green, McCreary, Pulaski, Russell, Taylor and Wayne Counties in Kentucky

2. Funding - \$56,000 PATH Funds

3. Services Plan –

a. Number served

It is estimated that 120 individuals will be served; of these, approximately 85% are “literally” homeless.

b. Services to be provided with PATH Funds

The services that will be provided are:

- Outreach;
- Screening and diagnostic treatment;
- Habilitation and rehabilitation services
- Referrals for primary health services, job training, educational services, and relevant housing services

c. Existing programs

Access to homeless services is through:

- Local Food Pantries that provide food or food vouchers from local merchants,
- Appalachian Research and Defense Fund of KY, Inc., which provides legal services to the homeless;
- Lake Cumberland Community Services Organization, which provides food and utility assistance, initial month's rent or temporary lodging assistance;
- Local Ministerial Associations, which provides food, lodging assistance (1 to 6 days of lodging assistance) and service referrals;
- The Homeless Education Grant Program in McCreary County provides educational services and outreach;
- Local churches in each county provide numerous services to the homeless;
- Pulaski Emergency Relief Ministries provides initial rents and deposits;
- The Adanta Group, which is the primary provider of mental health services, alcohol and drug counseling, and psychiatric services.

d. Gaps in services

The ten-county service area does not have a homeless shelter to serve the homeless population. The need for "one-stop shopping", where homeless individuals can find 24-hour shelter and receive coordinated referrals in a single location recognized by other service providers, would be beneficial. The homeless, or those at imminent risk

of homelessness, are referred from one agency to another in an attempt to achieve permanent housing. Lack of clear responsibility for serving particular groups has often resulted in no one taking responsibility. The lack of living skills, adequate education or training, past criminal history and co-occurring disorders contributes to homelessness. Housing connected to supportive services for special needs persons faces the problem of neighborhood acceptance which creates obstacles in locating safe, decent and affordable housing. There is also a lack of capable non-profit organizations to house/serve difficult populations. National competition for limited federal funding of supportive housing further limits each community's ability to provide adequate housing.

The hiring of a Housing Support Specialist within the Community Mental Health Center (CMHC) has provided outreach and housing support services for the identified homeless population in the 10 county service area. This position has allowed the region to identify a full-time employee dedicated specifically to serve the needs of the homeless or those at imminent risk of becoming homeless. This staff person has attended all Interagency Council Meetings in the region, CMHC's psychiatric staffings, staff meetings, adult case management monthly supervision meetings, therapeutic rehabilitation director's meeting and many other informal one-on-one meetings within the region. Referrals have been received from outside of the CMHC.

A strategy to overcome gaps would be to promote the formation of cooperative efforts of community resources to create the necessary facilities and services. One of the keys to providing special needs housing is for existing, non-profit organizations with the desire and management capacity to undertake new projects by utilization of all available funding sources, including tax credits, tax exempt bonds and other government funding. One important strategy would be to promote and continue to participate in the regional continuum of care system and interagency councils that will effectively transition persons who are homeless to appropriate affordable, safe and quality permanent housing. The resources to effectively meet the varied needs of the diverse homeless population must come from a myriad of sources such as federal, state, local and private. Therefore, in order to most efficiently coordinate these resources, a regional approach must be taken. Within the past year the organization has begun to develop strategies to overcome gaps in providing services for the homeless population. The hiring of additional Housing Support Specialists will continue providing outreach and housing support services.

e. **Special Needs of Clients with co-occurring Serious Mental Illness and Substance Use Disorders**

The CMHC provides mental health/substance abuse treatment for any client that is severely mentally ill. The services that are offered to the special needs population are:

- Case management;
- Therapeutic Rehabilitation;
- Substance abuse screening and assessment;
- Outpatient therapy;
- Inpatient therapy;

- Family counseling;
- Group counseling, and
- Crisis stabilization

Referrals for substance abuse treatment may include:

- Diagnostic and screening
- Outpatient treatment;
- Intensive outpatient treatment;
- Inpatient treatment, and
- Group counseling.

f. **Housing Services**

The housing services offered include assistance with housing applications for:

- Local apartments;
- Lake Cumberland Housing and Urban Development;
- Public Housing Authorities;
- The Adanta Tenant Based Rental Assistance Program, and
- Kentucky Housing Corporation's Safe Haven Program

The Housing Support Specialist has established a working relationship with private landlords, which allows continued housing units to be utilized by the PATH Program. Homeless individuals have been assisted with appointments with Housing Authorities, community resources, treatment appointments and any other needs which may impair the individual's ability to maintain housing.

4. *Coordination with Continuum of Care –*

The organization's Housing Developer is currently attending all required Continuum of Care meetings. Also, the Housing Developer works closely with Kentucky Housing Corporation's Staff and stays current with The Consolidated Plan.

5. *Cultural Competence/Diversity-*

There is ongoing training within the organization regarding cultural competence/diversity, which is sensitive to age, gender, and race/ethnic differences of severely mentally ill clients. These trainings are normally offered during the Case Manager's monthly meeting.

6. *Consumer and Family Participation –*

The Adanta Group's Housing Support Specialist works closely with the existing Peer Support Program, which serves as a valuable resource in planning activities. The Housing Needs Assessment is completed with the consumer and, when applicable, with the identified family members; as are the housing goals and housing plan. Clients and/or family members are encouraged to participate within the organization at all levels, and are active participants in the local HB843 Regional Planning Council.

Kentucky River Community Care, Inc.

1. Name, type of organization and region served –

Kentucky River Community Care, Inc. (KRCC) is a private non-profit Community Mental Health Center and provider of mental health, substance abuse, mental retardation and supportive housing services, serving Breathitt, Knott, Lee, Leslie, Letcher, Owsley, Perry and Wolfe Counties in southeast Kentucky.

2. Funding - \$49,000

3. Services Plan –

a. Number served

A total of 48 clients are anticipated to be served in the PATH program for this next fiscal year. All are “literally” homeless.

b. Services to be provided with PATH Funds

The PATH funds go to directly support the Housing Coordinator/Case Manager who operates the six emergency apartments for KRCC clients who are homeless and mentally ill. Homeless persons needing an apartment during their treatment are provided one until the persons is stable enough and has the funds available to get permanent housing. Services to be provided are:

- Case management services;
- Supportive and supervisory services in residential settings;

c. Existing programs

This project is a partnership with area homeless services providers such as Hazard-Perry County Community Ministries, the LKLP Domestic Violence Shelter, Project ADVANCE intensive outpatient program for women , and a variety of churches, social services agencies, law enforcement and others who refer persons for emergency housing and case management services.

d. Gaps in services

The availability of housing for persons with severe mental illness, after psychiatric hospitalization or after being evicted from another housing provider, is limited in southeast Kentucky. These apartments give persons a chance to get back on their feet until they have an income and another permanent place to live. The apartments are linked with the KRCC community mental health services so the client receives the types of services he or she needs until able to function more independently.

e. Special Needs of Clients with co-occurring Serious Mental Illness and Substance Use Disorders

KRCC offers a full range of community mental health and substance abuse services including residential, outpatient, intensive outpatient, psychiatric, primary health care, and other services such as crisis, trauma, and case management.

f. **Housing Services**

KRCC Case Managers and the Housing Coordinator/Outreach Case Manager maintain lists of housing resources in the area. KRCC also has a permanent housing program with apartments in Knott, Wolfe, Owsley, Breathitt and new ones under development in Lee County. Plus KRCC also works to improve housing resources through the Continuum of Care process and its contacts with other area agencies such as Hazard Perry County Community Ministries and the LKLP Domestic Violence Shelter, Caney Creek Rehab Complex, and others.

4. *Coordination with Continuum of Care –*

Hazard Perry County Community Ministries is the convener of the Kentucky River Region Continuum of Care Committee, which meets periodically to discuss housing needs in the region. The Project Director and the Housing Coordinator/Case Manager attend these meetings.

5. *Cultural Competence/Diversity-*

Eastern Kentucky is very sensitive to cultural issues since most clients here are sensitive to Appalachian stereotypes. All KRCC staff are trained in cultural sensitivity and most are Appalachian Eastern Kentucky natives.

6. *Consumer and Family Participation –*

During February 2006 a focus group of Housing Services consumers was held at the Perry County Outpatient offices of KRCC. They described the services they received through the homeless program as life saving. Many tearful testimonials were given by persons who believed that they have a new start on life because of the KRCC homeless services. They particularly liked the wraparound funding support that gave them the opportunity to set up their own apartments. Among KRCC's staff are formerly homeless people and the Board of Directors likely has undisclosed formerly homeless persons on it.